ENP-044

Nha Huu Vo

PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

First Named Inventor

DECLARATION FOR UTILITY OR

DESIGN

Attorney Docket Number

PATENT APPL	COMPLETE IF KNOWN								
(37 CFR 1	Application Num	ber							
X Declaration Submitted OR with Initial	Declaration Submitted after Initial Filing (surcharge	Filing Date	Nov	rember 7, 2	002				
		Group Art Unit	ТВ	D					
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	ТВІ))				
As a below named inventor, I he	reby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and names are listed below) of the sub	sole inventor (if only one r	name is listed below) o	r an original, first	and joint inventor (if plu	ral				
Novel Anhydrolide Derivatives Having Antibacterial Activity									
	(Title of the	Invention)							
the specification of which									
X is attached hereto				,					
or was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number	and was ame	ended on (MM/DD/YY	M	(if ap	plicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	oreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Atta YES N					
Additional foreign application	numbers are listed on a su		a sheet PTO/SB/	/02B attached hereto:					

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR X Correspondence address below								
Stacie S. Capotosto								
Enanta Pharmaceuticals, Inc., 500 Arsenal Street								
City	Watertown			Stat	MA te	ZIP 02472		
Country	USA T	ele	phone (617)-	-607-0800 Fax (617)-607-0535				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SC	NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor							
Given Name Family Name VO (first and middle [if any]) Family Name VO								
Inventor's Signature	Malanz	77	0			Date 11/7/02		
Residence: City	Malden		MA State		Country	US Citizenship		
Mailing Address 92 Devir Street Apartment 404								
City	Malden		State MA		02148 ZIP	USA Country		
NAME OF SE	COND INVENTOR:]	A petition has	s bee	en filed for this unsi	gned inventor		
Given Name Ying Family Name HOU or Surname								
Inventor's Signature						Date 11/07/02		
Residence: City	/ Everett		MA State		USA Country	CHINA Citizenship		
Mailing Address 53A Floyd Street								
City	Everett		State MA		_{ZIP} 02149	USA Country		
X Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

Please	type	a pl	lus	sign	(+)	inside this box	→	+
--------	------	------	-----	------	-----	-----------------	----------	---

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any	/])		Family Nan	ne or S	umame			
Ly Tam		Phan						
Inventor's Signature	<i></i>				NOV 7 02			
Residence: City Malder	State MA		Country USA		Citizenship US			
Mailing Address 66 Devir Street								
Apt. 211 Mailing Address								
_{City} Malden	State MA		ZIP 02148	Country USA				
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any	/])	Family Name or Sumarne						
Yat Sun Or								
Inventor's Signature		Date			Date 11/7/02			
Residence: City Watertown	State MA		Country USA		Citizenship US			
Mailing Address 169 Fayette Street								
Mailing Address								
Watertown City	State MA		21P 02472	Cou	usa			
Name of Additional Joint Inventor, if a	ny:		A petition has been filed	for this	unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature		Date						
Residence: City State			Country	Citizenship				
Mailing Address								
Mailing Address								
City	State		ZIP	Co	untry			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.